## N2000000 7245

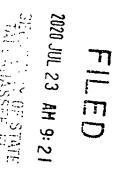
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SE72 : 273

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Tallahassee, FL 32314

Seminole warners Soliball, Inc		
SUBJECT:		
Name of Corporation N20000007245		
DOCUMENT NUMBER:		
The enclosed Articles of Correction and for	ee are submitted for filing.	
Please return all correspondence concerni John K Bitzer	ng this matter to the following:	
Name of Contact Person		
Seminole Warriors Softball, Inc		
Firm/Company		
2724 Deer Berry Ct		
Address		
Longwood, Fl 32779		
City/State and Zip Code		
jbitzer@cfl.rr.com		
E-mail address: (to be used for future annual r	report notification)	
For further information concerning this m	·	
John Bitzer	407 221-7297	
Name of Contact Person	at () Area Code Daytime Telephone Number	
Enclosed is a check for the following amo	nunt.	
□ \$35.00 Filing Fee	■ \$43.75 Filing Fee & Certificate of Status	
☐ \$43.75 Filing Fee & Certified Copy	☐ \$52.50 Filing Fee, Certificate of Status & Certified Copy	
Mailing Address:	Street Address:	
Amendment Section	Amendment Section	
Division of Corporations	Division of Corporations	
P.O. Box 6327	The Centre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## **ARTICLES OF CORRECTION**

For

Name of Corporation as currently filed with the Florida De	pt. of State
N20000007245	
Document Number (if known)	
Pursuant to the provisions of Section 617.0124, Florida Statutes, t Articles of Correction within 30 days of the file date of the docum	
These articles of correction correct Articles of Document Type 6/23/2020	Being Chrected)
filed with the Department of State on (File Date of Document)	<u> </u>
Specify the inaccuracy, incorrect statement, or defect:	
NAME OF PRESIDENT MITCHELL, CARLEE	202 SE
	23 23
	SSE S
	ا يو التات
	<b>T 2</b>
Correct the inaccuracy, incorrect statement, or defect: NAME OF PRESIDENT SHOULD BE WOOD, CARLEE	
(Signature of a director, president or other officer - if directors on the properties of the record appointed Holiciary, by that fiduciary.)	or officers have ceiver, trustee, or
JOHN K BITZER	TREASURER
(Typed or printed name of person signing)	(Title of person signing)

Filing Fee: \$35.00